



MISSOURI DEPARTMENT OF NATURAL RESOURCES
DIVISION OF GEOLOGY AND LAND SURVEY
WATER WELL RECORD

ENTERED

MAIL CANARY COPY TO
WELL DRILLER'S FUND
P.O. BOX 250
ROLLA, MISSOURI 65401
ENCLOSE \$15.00 WATER WELL CERTIFICATION
FEE WITHIN 60 DAYS AFTER WELL COMPLETION

DO NOT FILL IN
STATE WELL NO. **AD5888**
OTHER NO. **456141**

OWNER	NAME EUGENE KOLLMEYER		ADDRESS Rt 3 Box 50 Farmington, MO 63640	
DRILLING CONTRACTOR	NAME GOURD Plumbing Co. Imperial Drilling Co.		ADDRESS Farmington, MO 63640 756-5731 Excelsior, MO. 63028 937-0292	
LOCATION AND DATE	MILEAGE AND DIRECTION FROM NEAREST TOWN OR HIGHWAY 4 miles south east of Farmington		DATE COMPLETED 7/6/88	
PROPOSED USE OF WELL	<input checked="" type="checkbox"/> DOMESTIC <input type="checkbox"/> PUBLIC WATER SUPPLY <input type="checkbox"/> HEAT PUMP <input type="checkbox"/> OTHER (SPECIFY)			
DRILLING EQUIPMENT	<input type="checkbox"/> MUD ROTARY <input type="checkbox"/> REVERSE ROTARY <input checked="" type="checkbox"/> AIR ROTARY <input type="checkbox"/> CABLE TOOL <input type="checkbox"/> OTHER (SPECIFY)			
CASING DETAILS	DEPTH (FT) 160'	DIAM (IN) 6 1/4"	WEIGHT/FT OR SCHEDULE 13.6 lb/ft	SPACER GUIDES USED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO JOINTS <input type="checkbox"/> GLUE <input type="checkbox"/> THREADED <input checked="" type="checkbox"/> WELDED DRIVE SHOE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO MATERIAL <input checked="" type="checkbox"/> STEEL <input type="checkbox"/> PLASTIC <input type="checkbox"/> OTHER
GROUTING DETAILS	TYPE OF SEAL <input checked="" type="checkbox"/> FULL LENGTH <input type="checkbox"/> TOP <input type="checkbox"/> BOTTOM	MATERIAL USED <input type="checkbox"/> NEAT CEMENT <input type="checkbox"/> BENTONITE	DEPTH OF SEAL TOP _____ BOTTOM _____	SACKS OF CEMENT OR BENTONITE USED TOP _____ FULL LENGTH cuttings BOTTOM _____ DRILLING SUSPENDED 72 HRS AFTER GROUTING <input type="checkbox"/> YES <input type="checkbox"/> NO
SCREEN DETAILS	MAKE _____ SLOT SIZE _____ DIAM (IN) _____ IF GRAVEL PACKED _____ DIAMETER OF WELL INCLUDING GRAVEL PACK (IN) _____			LENGTH OPEN TO AQUIFER (FT) _____ GRAVEL SIZE (IN) FROM (FT) _____ TO (FT) _____
YIELD TEST	<input type="checkbox"/> BAILED <input checked="" type="checkbox"/> COMPRESSED AIR <input type="checkbox"/> PUMPED		HOURS _____ YIELD (GPM) 30	
WATER LEVEL	MEASURE FROM LAND SURFACE STATIC (FT) 67		DURING YIELD TEST AFTER _____ (FEET) HOURS _____	DEPTH OF COMPLETED WELL IN FEET BELOW GROUND SURFACE 209'
COMPLETION DATA	PUMP CAPACITY AT SETTING 10 GPM 160 FEET	TYPE OF TOP CASING SEAL RA	WELL DISINFECTED AFTER DRILLING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO AFTER SETTING PUMP <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	IS THERE AN ABANDONED WELL? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO WAS IT PROPERLY SEALED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
DEPTH FROM LAND SURFACE FEET TO FEET		FORMATION DESCRIPTION		DIAM OF DRILL HOLE
0 7 7 43 43 51 51 73 73 113 113 143 143 209		CLAY some sandy sandy limp? limp sandstone, some sandy sandy limp Broken sandstone & stems of loose sand Loose Brown sandstone & clay sandstone, some soft 170 ft to 175		8 7/8" 6"
LOCATION OF WELL (SHOW LOCATION IN SECTION PLAT) COUNTY ST FRANCIS NE / NW / SEC 15 T 35 N R 6 W TOTAL DEPTH 209' ELEV _____				
Sketch exact location of well with distances to at least two permanent landmarks. Also show abandoned well.				
IF YIELD WAS TESTED AT DIFFERENT DEPTHS DURING DRILLING LIST BELOW				
FEET		GALLONS PER MINUTE		
188		15		
209		30		
40108560				
NOTES				
SIGNATURE (WELL OWNER) _____ DATE _____				
I hereby certify that the well herein described was constructed in accordance with Department of Natural Resources requirements for construction of the type of water supply indicated above				
SIGNATURE (PERMITTEE) _____ DATE _____				
PERMIT NO. C 40-00052 B-00028 B-00049				